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ABSTRACT

The Riker's Island program was designed for 321 adolescents between the ages of 16 and 21 who were incarcerated at the Riker's Island facility for remanded and sentenced prisoners in New York City. The student population was made up of predominantly black and Puerto Rican youngsters from low socio-economic areas of New York City. Many of these youngsters had been arrested previously. Some of them had a history of drug and sex offenses. The majority of them were school dropouts with a median age of 18. They all needed remedial instruction. The objectives of this program were to improve reading and mathematics scores and the knowledge of English as a second language for students whose first language was not English. In addition, the program was designed to extend awareness of the effects of drug abuse, extend knowledge about sex and venereal disease, and increase knowledge about family living. As a result of the program, pupils did not make the expected progress in reading and mathematics. Measurement of the English as a second language program effectiveness could not be made because there was not enough time between initial and final ratings of pupils. Short exposure time to the drug, sex education and family living programs also precluded any accurate evaluation of their effectiveness. Problems associated with conducting an educational program in a prison are explored in this evaluation report. Appendices include questionnaires used in the evaluation. (Author/PR)

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RESEARCH REPORT

Evaluation of a Program for Adolescents
in Corrective Institutions -

Riker's Island

Prepared by
Kathleen Lolis

U.S. DEPARTMENT OF HEALTH,
EDUCATION & WELFARE
NATIONAL INSTITUTE OF
EDUCATION

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Dr. David A. Abramson, Director



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INTRODUCTION

Description of the Program

The Riker's Island Program was designed for adolescents between the ages of 16 and 21 who are incarcerated at the Riker's Island facility for remanded and sentenced prisoners. The student population was made up of predominantly black and Puerto Rican youngsters from low socio-economic areas of New York City who constituted a high-risk vulnerable group many of whom had been involved previously with the law. In many instances there was a history of drug and sex offenses. The majority were school dropouts with a median age of 18 whose reading and mathematics levels were low and who were in need of remedial assistance in the use of the English language.

The specific objectives of this program were to:

- I. a. improve reading scores as measured by the Metropolitan Achievement Test (Reading)
- b. improve mathematics scores as measured by the Metropolitan Achievement Test (Arithmetic)
- II. improve knowledge of English as a second language for at least 75% of those whose primary language is one other than English
- III. a. extend awareness of the effects of drug abuse
- b. extend knowledge of reproductive processes and venereal disease
- c. increase pupil readiness to question their attitudes towards various components of family living

The program plan called for 11 teaching positions which were to be divided among students in the reformatory and remand centers and used to supplement the regular school (P.S. 189 Bx) program. With the exception of two positions in health education and two in the teaching of English as a second language, the other seven positions were to be used for remediation in basic school subjects. The remedial class was planned to take boys in small groups of 3 or 4 for a single class period each day.

PROCEDURES

Evaluation Objectives and Procedures

The original evaluation design did not meet with final State Department of Education approval until spring, 1971 and was not capable of full implementation for the following reasons:

- a. The program was never fully staffed.
- b. Three of its 9 teachers were not hired until April and the term ended June 30.
- c. The evaluator was not assigned to the project until just prior to the spring vacation which was mid-April.
- d. Pupil turnover was high particularly in the remand center.
- e. It was not possible for the evaluator to obtain permission from the Department of Correction to personally administer the instruments of measurement. They were teacher-administered.

The following procedures were used:

- I. To describe the program and its implementation:
 - a. The Title I funded classes were observed within the public school situated in the reformatory and within the one situated in the remand center.
 - b. Interviews were held with the Project Coordinator, and other personnel.
 - c. Unstructured on-site interviews were held with members of the target population.
 - d. School record data was used to provide information on class register, pupil attendance and characteristics of the Title I teaching staff such as date of appointment to the project staff, license held when appointed, and the nature of assignment in the project.
- II. a. To determine whether or not scores on the Metropolitan Achievement Test (Reading) improved, the initial test was administered on April 30 and final testing was done on June 30. The difference between initial and final mean test scores was submitted to a t-test.

- b. To determine whether or not scores on the Metropolitan Achievement Test (Arithmetic) improved the test was administered initially on May 3, 1971 and final testing was done on June 30. The difference between initial and final mean test scores was submitted to a t-test.

III. To determine whether or not 75% of those whose primary language is one other than English, improved in their knowledge of English as a second language, students enrolled in classes for the Teaching of English as a Second Language were rated by their "T.E.S.O.L." teachers on the Performance Scale for Evaluating Oral Communication in English. Initial and final ratings were obtained. This scale, which includes components for speaking and understanding spoken English is in Appendix A.

- IV. a. To determine the degree to which awareness of drug abuse was extended, a 40 item questionnaire was used to ascertain initial knowledge in this area. Young prisoners who may or may not have been apprehended because of drug use or association with "users" can be expected to have specific sensitivities which would interfere with their questionnaire responses. Therefore, the 56 students who were in the remand center and the reformatory at the start of the instruction the final week of April, 1972 were permitted anonymity in responding to the questionnaire.

A final examination which was teacher-made and course-content based was administered to 100 students in the remand center and 44 students in the reformatory on June 30, 1971. The final examination items pertaining to drug abuse were part of a larger final examination which also tested for knowledge in family living and sex education. A copy is in Appendix B.

There was only one item which was common to both the initial questionnaire and the final examination. It required knowledge that marijuana is not physically addictive.

It was not feasible to follow the original research design for comparability of initial and final results as the students had too short an exposure to the program for educational results to have been achieved.

- b. To determine the degree to which awareness in family living and knowledge of reproductive processes and venereal disease were extended, several instruments were used. Initially, in the final week of April, 1971 an Attitude Questionnaire which had been developed by the Bureau of Educational Research for a previous study, was administered to students in the reformatory and remand center. The questionnaire is in Appendix C. On June 30, 1971, a final examination which was teacher-made and course content based was administered to 100 students in the remand center and 44 students in the reformatory. The items pertaining to family living and knowledge of reproductive processes and venereal disease were part of a larger final examination which also tested for knowledge of drug abuse. The instruments were administered by the classroom teachers as it was not possible for the evaluator to secure permission from the Department of Correction to personally conduct these testing sessions.

It was not feasible to follow the original research design for comparability of initial and final results as the students had too short an exposure to the program for educational results to have been achieved.

An additional instrument entitled "What I Learned in Family Living" which had been developed by the Bureau of Educational Research for a previous study was administered to 181 students on June 29, 1971. A copy will be found in Appendix D.

FINDINGS

Program Implementation:

The Principal (acting) of the Riker's Island school P.S. 189, Bronx, and its annex which was called The Adolescent Remand Center, functioned in the capacity of Project Director.

The project was planned largely by a headquarters staff in terms of the number of remedial and compensatory type positions which could be allotted within a budget which was not "found" until mid-year.

Characteristics of the Teaching Staff

Interviews with the Principal revealed great difficulty in hiring staff with the skills needed to work with an incarcerated population especially at mid-year. Although there were 11 positions only 9 could be filled.

The first two teachers, one a remedial reading specialist and the other a teacher of English to the Spanish speaking, were appointed February 22, 1971 and served at the remand center. It was April 21, 1971 before the Title I staff was finalized with the appointment on that date of a remedial reading teacher to the remand center.

On February 24th the Reformatory got a teacher of English as a Second Language.

March 3 it got a remedial math teacher and the remand center got a teacher of basic remedial subjects. Initially both these remedial teachers were used as the program specifications read, f.e., for small groups who were seen one period a day, each, for compensatory education. By mid-April, due to population needs of the school, this remedial teacher in the remand center was working in a self-contained classroom where he taught all subjects to a morning group and to a second group in the afternoon. By May the teacher assigned to remedial math in the reformatory was re-assigned to the remand center where he did remedial work with groups as large as 10 at a time.

March 18 a remedial reading teacher was assigned to the reformatory where he worked with small groups as the program design specified. A Health Education teacher who taught Drug Abuse and Family Living including Sex Education, was assigned to the reformatory on April 2 and one was assigned to the remand center April 19.

Both the Health Education teachers, although "substitute" were teaching the subject for which they were licensed.

Three teachers, two of whom were assigned to remedial reading and one to remedial math, held substitute common branch licenses.

One remedial reading teacher and 1 remedial math teacher held substitute junior high school social studies licenses.

The T.E.S.O.L. teacher in the reformatory held a regular common branches license and the T.E.S.O.L. teacher in the remand center was licensed as a substitute teacher of High School English.

In general, the staff, who were hired late in the school year, were inexperienced at teaching in the subject area to which they were assigned.

Student Turnover

Attendance and class register records were summarized by school personnel.

Those students assigned to the remand center were there awaiting trial and frequently were in school only a day until release pending trial. "Three days" was given by the school Principal as a typical length of stay.

The high remand center registers which average 1360 for all the teachers in the Title I program there reflect the short length of time each student stays. In an 83 day period one teacher had a total pupil register of 1528. The lowest total pupil register was 648 for an 81 day period for one teacher in the reformatory where students are sentenced youths. The average Title I program register in the reformatory is 956.

An attendance unit can be defined as the presence of a single pupil for a single session with his teacher.

The number of such attendance units for the program as a whole from February 22 through June 30 is 8798. For the 4 teachers assigned to the reformatory there were 3281 and for the 5 teachers assigned to the remand center there were 5517.

Class Size

Class size varied considerably not only from teacher to teacher but also for some teachers at different periods during the term.

Two of the 4 teachers in the reformatory saw children in small groups which changed each period of the school day. One of these who taught English as a Second Language was on the staff 81 days and was able to individualize her work with the students to a high degree; she saw children in groups of 3 or 4 for at least one period a day and sometimes for longer. The other, a teacher of remedial reading, who was employed for 58 days, averaged 14 children a day who were seen in small groups of 3 or 4 each period. The health education teacher in the reformatory averaged 19 students a day in class-sized groups over a 51 day period. The fourth, a teacher with a common branches license, hired for remedial mathematics, in the reformatory, averaged 12 students a day. They were seen in 2 groups for half a school day each for a curriculum consisting of basic school subjects. His assignment according to the Title I plan was to have been remedial mathematics as an educational supplement for small groups of boys who were to work with him for one class period a day each.

Class size in the remand center was larger. Only the Health Education teacher there was used according to the original plan; he saw a class-sized group each period during which he taught family living and drug abuse. He averaged a daily attendance of 19 for the 52 days he served.

The remaining 4 teachers who, according to plan, were to have seen a different small group each period actually saw one large group in the morning and one in the afternoon. The curriculum included the subject specialty for which the teacher was hired as well as general subjects. The 4 teachers taught an overage of 17 students a day. Class size was smaller as the students were seen in 2 groups; one in the morning and one in the afternoon.

Academic Achievement

The Metropolitan Achievement Test (Reading) was administered to the 52 students enrolled in the remedial reading programs on April 30, 1971.

On June 30, 1971, only 5 of the initial 52 students were still incarcerated and an alternate form of the Metropolitan Achievement Test (Reading) was administered to those students. A comparison of the initial and final scores yielded a mean for the initial test of 23.60 and a mean for the final test of 26.40, with standard deviations respectively of 32.52 and 24.00. The difference in scores was found to be not significant at the .05 level when submitted to a t-test.

The Metropolitan Achievement Test (Mathematics) was administered May 3, 1971, to 11 students who were enrolled in a remedial mathematics program on that date.

The final administration of the Metropolitan Achievement Test (Mathematics), using an alternate form, was June 29, 1971. The initial mean score of 43.72 when compared with the final mean score of 48.78 by means of a t-test, showed no significant difference.

Thus, in the short time that the remedial programs were in effect with the very few children they could serve because of the high rate of turnover, especially in the remand center, there was no significant impact on achievement.

This reflects on the poor suitability of this type of program for students who can be exposed to it for only a short time.

Teaching English as a Second Language (T.E.S.O.L.)

The scale for Evaluating Oral Communication in English for Students of English as a Second Language, which was developed by the Bureau of Educational Research for a previous study, was used for initial and final teacher ratings of student competence in English. This scale includes the following components: Language Patterns, Pronunciation, Vocabulary and Intonation. A copy appears in Appendix A.

The teacher in the reformatory who had 18 students who were present for both the initial rating, which was in May, and for the final rating, in June, had been on duty since February 24. A comparison of initial and final teacher ratings showed no difference for any of the 18 students.

In the remand center, 17 children were rated initially and finally by the teacher who had arrived February 22, 1971. The same result obtained; namely, that between May and June no child had any difference in score.

Thus, whatever gains might have taken place in the security these children felt with English as a Second Language, there was no objective performance criteria that improvement had taken place. However, not all learning in language is measurable and often there is an intangible readiness component. Furthermore, no real conclusion as to program effectiveness can be drawn for students who have had such a short exposure to it between initial and final ratings.

Awareness of Drug Abuse

A 40-item opinionaire on Drug Abuse was administered at the start of the program of instruction in this area to the 56 student enrollees in the remand center and the reformatory who were permitted to take it anonymously. In Table I the items have been ranked in descending order of percent of agreement.

Table I shows the percentage of response to each item. Items marked with an asterisk (*) are those to which there was not a 100% response.

TABLE I

Opinionnaire on Drug Abuse Administered April, 1971 To
56 Students Just Prior to Instruction on Drug Abuse
Items are Ranked by Percent of Respondents Who Agree

	<u>AGREE</u> %	<u>DISAGREE</u> %	<u>NOT SURE</u> %
* Drug addicts should be treated as sick people and not as criminals.....	91.0	3.6	3.6
* Sniffing glue can damage the brain.....	82.6	7.1	8.9
The dangers of heroin use are mainly due to overdose, use of unsterile needles and general neglect of health.....	80.4	7.1	12.5
* Medical tests are available that can tell if you have recently used drugs.....	73.2	14.3	10.7
LSD can cause chromosome change - birth defects	67.8	16.1	16.1
* Barbiturates - prescription sleeping pills - can lead to physical as well as psychological dependence.....	67.8	12.5	17.9
Drug use should be a matter of personal decision	66.1	21.4	12.5
* Addicts will do anything to get more drugs	66.1	25.0	7.1
* Amphetamines - "pep" or "diet pills" can produce psychological dependence.....	64.2	17.9	16.1
Barbiturates used with alcohol can cause death	64.2	17.9	17.9
There is nothing wrong with smoking marihuana as long as a person does so in moderation.....	62.5	26.8	10.7
One of the difficulties in treating most addicts is that they appear to enjoy the drug way of life	60.0	29.1	10.9
* Most people who abuse drugs do so because their friends do.....	58.9	23.2	16.1
* Current laws regarding marihuana use are too severe.....	58.2	12.7	27.3
* Smoking marihuana is no more harmful than drinking liquor.....	57.1	28.6	12.5

	<u>AGREE</u> %	<u>DISAGREE</u> %	<u>NOT SURE</u> %
Marihuana should be legal for anyone over 18	55.3	42.9	1.8
Education is the best way of preventing drug abuse.....	53.6	26.8	19.6
* The medical benefits from most prescription drugs outweigh the risk that they might be misused.....	53.6	17.9	25.0
Amphetamine overdose results in blackouts and hallucinations.....	52.7	12.7	34.6
* It is illegal to possess marihuana.....	50.0	35.7	12.5
* Most people who smoke marijuana use it for a while and they go to something stronger.....	48.2	35.7	14.3
* A lot of people need drugs to cope with stress	46.4	41.1	10.7
Most people who smoke marihuana try it a few times and then never use any other drugs.....	44.6	39.3	16.1
There is no one best method of treatment for drug abuse.....	42.9	33.9	23.2
* First drug offenders usually get off with little punishment.....	41.9	41.9	14.4
* Physical dependence is possible for all kinds of drugs.....	41.1	35.7	21.4
All drug abusers are pretty much alike.....	41.1	46.4	12.5
Using heroin is addictive, even a single dose	41.1	42.9	16.0
Psychic dependence is common to all forms of drug abuse.....	37.5	33.9	28.6
* Methadone cures addiction.....	37.5	37.5	23.2
* Current laws regarding heroin use are too severe.....	35.7	48.2	14.3
Most people who smoke marihuana use it for a long time but never try anything else.....	34.5	40.	25.5
* Heroin can be legally obtained by prescription	26.8	46.4	23.2
Marihuana is harmful to the body.....	25.0	51.8	23.2
* Strict and harsh punishment of drug abusers will keep others from using drugs.....	23.6	65.5	9.1

	<u>AGREE</u> %	<u>DISAGREE</u> %	<u>NOT SURE</u> %
* People can use drugs to find out more about themselves.....	17.9	67.8	10.7
* Marihuana is addictive.....	14.3	67.8	16.1
Breathing freon and other gases is harmless and legal.....	14.3	55.4	30.3
* Once an addict, always an addict.....	12.5	75.	10.7
Everyone should try drugs at least once to find out what they are like.....	12.5	78.6	8.9

A "final examination" which was teacher constructed, teacher administered and course-content based was given June 30, 1971 to 100 students in the remand center and 40 students in the reformatory who on that date were receiving formal instruction in Drug Abuse and Family Living. The first questionnaire was anonymous and we do not know if any of the original 56 students were included in the population.

An item calling for knowledge that marihuana is not physically addicting was common to both instruments. Of those who responded to the anonymous survey, 67.8% said marihuana is not physically addictive. Seventy percent of those who took the final examination responded that marihuana is not physically addictive.

It is not possible to draw conclusions as to the actual effectiveness of the instruction because of the extremely high student turnover. The amount of exposure each student had to specific instruction is unknown.

However, the nature of the anonymous replies to the initial opinionnaire does not indicate a need for formal instruction in Drug Abuse as much as it suggests a need for the kind of group work which will favor attitudinal change.

Awareness of Family Living:

Conclusions may not be drawn from the data obtained in this part of the evaluation because of unresolved problems in the administration of the instruments

and the short exposure of students to the program of instruction.

Interviews with students and staff revealed that student interest centered in what would happen to them in court and the ways and means of establishing themselves economically on release. This would make it difficult to sustain interest in a program of instruction in family living. Further, those over 18 could earn 50 cents a day in work details if they did not attend school. Interest was expressed in "getting a high school equivalency diploma", "going to college" and "getting a job".

SUMMARY AND CONCLUSIONS

The Riker's Island Program which began late in February, 1971, but was not fully staffed until April, 1971, was designed for 321 adolescents between the ages of 16 and 21 who were incarcerated at the Riker's Island prison for remanded and sentenced prisoners.

The program sought to raise levels of achievement in basic school subjects such as reading and mathematics and to assist those of non-English speaking origin to better their facility with English as a second language. Another program aim was education in family living including sex education and drug abuse.

The initial program planning was done on extremely short notice. As planned it was not as well suited as it could have been to the needs of the incarcerated young men. The program with the exception of one class in remedial reading and one T.E.S.O.L. class which began in February, did not start until mid-April, 1971. Only 9 of its 11 teaching positions could be filled.

These 9 teachers, who were hired late in the school year were inexperienced in the subject areas to which they were assigned. Only one teacher was regularly licensed.

Pupil attendance was excellent in relation to pupil registers. Pupil population was relatively more stable in the reformatory where youths were

serving sentences then in the remand center where turnover was high. Class size was high in terms of the design as originally conceived.

Students were exposed to the reading and mathematics programs for too short a time for effectiveness to be determined. Because of the high pupil turnover with correspondingly short exposure time to instruction, this type of remedial program is unsuited to the needs of the young men it served.

No real conclusions can be drawn as to the effectiveness of the T.E.S.O.L. program which enjoyed less pupil turnover than the others, as, due to the lateness in the school year at which the evaluator was assigned there was too short a period of time between initial and final ratings of pupils. The possibility exists, therefore that the T.E.S.O.L. program was successful.

A 40 item questionnaire on drug abuse was completed anonymously by 56 inmates just prior to formal instruction in drug abuse. It together with interviews held with inmates and staff, suggested a need for group work which would favor attitudinal change rather than for formal instruction in this area. It was not possible to draw conclusions as to the effectiveness of the actual instruction because of extremely short student exposure to it and factors involved in test administration.

The program in family living cannot be evaluated as to its effectiveness because of unresolved problems in the administration of the instruments and the short exposure of students to the specific instruction.

Interviews with students and staff revealed that students were more interested in getting a job immediately on release. For some who had been there long enough this job might be related to their vocational courses at Riker's Island. Students who knew they had a long time to serve were interested in college preparatory courses and courses at a college level which could be credited towards the newly established New York State External College Degree.

The image of education on Riker's Island has been badly affected because adolescents over 18 must choose whether to spend daily hours attending school or in a compensated work detail.

RECOMMENDATIONS

It is not possible to determine the efficacy of the remedial programs in reading and mathematics because there was too short a span between initial and final achievement test administration for educational gains to be measurable. Had the time interval between initial and final testing been longer there probably would have been even fewer students of the original group incarcerated at the time of final testing because of an extremely high rate of pupil turnover. Since most students can only be exposed to the program for too short a time for it to have an educational impact, it is recommended that the remedial programs in reading and arithmetic be discontinued.

Findings on the efficacy of the T.E.S.O.L. program are not conclusive as the time span between initial and final measurements was too short due to limitations beyond the control of the evaluator. No recommendation as to continuance of the program can be made on the basis of the formal data. Observation of the total program at Riker's Island and of the T.E.S.O.L. program itself suggests the need for it because so many of those incarcerated have difficulty with spoken English and those observed in the T.E.S.O.L. classrooms appeared to be positively involved with the program.

The program in Health Education which specifically emphasized education in drug abuse and sex hygiene yielded no conclusive data on which recommendations could be based due to conditions beyond the control of the evaluator. However, observation of the student population suggested the possibility that there would be need for and responsiveness to a "peer group" leadership program in drug abuse designed to offer the incarcerated youths emotional support for attitudinal changes rather than for the formal classroom type program that was offered in 1970-1971.

The regular school program at Riker's Island Reformatory included a preparatory

class for the High School Equivalency examinations. Attendance was optional. On the day it was observed the class was well attended by young men who were very attentive to the teacher. In order to be present they had to forego the fifty cents a day which is paid to those youths over 18 years of age who choose a work detail in the prison rather than school attendance. On interview some of these youths explained that back on "the mainland" they had found it necessary to have a high school diploma in order to get the kind of job from which they would not "split." An interest was also expressed in going to college so as to better their employment opportunities.

The image of education at Riker's Island has been badly affected because those who choose it sacrifice participation in a compensated work detail. In spite of this some youths seem motivated to attend a class in order to prepare for a High School Equivalency Examination. To encourage more youths to engage in formalized schooling it would seem advisable to provide program sequelae to the preparatory work. For example, post high school training could be offered which would enable students to pursue a college degree through the New York State extra-mural college degree program. As a corollary, The Youth Tutoring Youth Program might be offered. This enables college preparatory and college degree candidates to earn money through tutoring their peers. This program could be structured somewhat like the para-professional career ladder programs in the schools. A half-day of school and a half-day of work detail might be considered. An additional program offering might be one similar to the "Power Program" which provides training in oral and written English for prospective teachers.

A major concern expressed by the incarcerated young men was the nature of employment opportunities on release from "the island." The regular school program at Riker's Island offered specific vocational training of an industrial arts nature

in trades such as shoemaking and tailoring where there are present personnel shortages. But the guidance counselor assigned to the island school was overburdened and had no base "on the mainland" to establish necessary employment contacts and follow up with the young men through their initial adjustment period in employment. Thus, it is recommended that, if the program is recycled, a guidance counselor be placed in a mainland office which is easily accessible to employment locations.

APPENDIX A

Performance Scale for Evaluating
Oral Communication in English

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SCALE A - For Rating Pupil's Ability to Speak English

Directions: Enter for each pupil the letter A, B, C, D, E, F, or G corresponding to his estimated ability to speak English in the classroom, defined as follows:

- A - Speaks English, for his age level, like a native - with no foreign accent or hesitation due to interference of a foreign language.
- B - Speaks English with a foreign accent, but otherwise approximates the fluency of a native speaker of like age level. Does not hesitate because he must search for English words and language forms.
- C - Can speak English well enough for most situations met by typical native pupils of like age, but still must make a conscious effort to avoid the language forms of some foreign language. Depends, in part, upon translations of words and expressions from the foreign language into English and therefore speaks hesitantly upon occasion.
- D - Speaks English in more than a few stereotyped situations, but speaks it haltingly at all times.
- E - Speaks English only in those stereotyped situations for which he has learned a few useful words and expressions.
- F - Speaks no English.
- G - Child has been in class less than one week, and cannot be accurately rated at this time.

SCALE B - For Rating Pupil's Ability to Understand Spoken English

Directions: Enter for each pupil the letter A, B, C, D, E, F, or G corresponding to his estimated ability to understand spoken English in the Classroom, defined as follows:

- A - Understands with ease and without conscious effort the spoken English of the classroom, typical for native English-speaking children of like age and grade level. Requires, on the part of the speaker, no slowing of pace, simplification of vocabulary, over-precise enunciation, repetition or illustration.
- B - Understands spoken English with ease and without conscious effort in most situations, but occasionally must be helped to understand by repetition, illustration, or translation.
- C - Understands English in connected sentences as well as in single words - or phrases. However, must occasionally make a conscious effort to decipher and translate.
- D - Understands phrases and simple connected discourse in English only if he has time consciously to decipher and if the speaker slows his pace and simplifies vocabulary.
- E - Understands a few expressions and words which are repeated recurrently in stereotyped situations. Does not follow connected discourse in English.
- F - Understands no spoken English.
- G - Child has been in class less than one week and cannot be accurately rated at this time.

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PERFORMANCE SCALE FOR EVALUATING ORAL COMMUNICATION IN ENGLISH

Pupil's Name _____ Class _____ Teacher _____

This performance scale has two purposes: The first is diagnostic, serving to help the teacher to evaluate the pupil's performance in the various language skills. The second, is a summary evaluation which will help to identify the pupil's performance for organizational and administrative purposes.

DIRECTIONS TO THE TEACHER:

Place an x in one box on each line to indicate the pupil's performance in each language skill.

Performance Scale for Evaluating Oral Communication in English

Language Skills

Language Patterns
Usage, Structure,
Grammar

1	2	3	4	5
none	very limited	limited	average	correct

Vocabulary
choice of words,
use of words

1	2	3	4	5
none	few	limited	adequate	discriminating

Pronunciation
correct, clear
formation of
the sounds

1	2	3	4	5
habitual mispronunciation	frequent mispronunciation	occasional mispronunciation	rare mispronunciation	standard native pronunciation

Intonation
rhythm, stress,
pitch, juncture
characteristics

1	2	3	4	5
unsatisfactory	poor	intelligible	approaching native	standard native

The summary evaluation should take into account the over-all quality of communication in English.

SUMMARY EVALUATION

OVER-ALL FLUENCY

smoothness
facility
correctness

1	2	3	4	5
inarticulate	limited	hesitant	occasional faltering	facile

APPENDIX B

**Final Examination in Health Education:
Drug Abuse and Family Living Including
Sex Education**

Riker's Island Title I Program
Health Education Final Examination
June, 1971

Write "T" next to the statements you think are true and "F" next to the statements you think are false. You will have one hour to complete this short exercise that will test your knowledge on work covered in the above mentioned subject areas.

Good Luck and do YOUR best.

I. VENEREAL DISEASE

1. Penicillin can cure venereal disease.
2. You can catch syphilis from a toilet seat.
3. There are blood tests you can take to see if you have syphilis.
4. You can buy medicine in a store to cure venereal disease.
5. Untreated venereal disease can result in brain damage, heart damage, bone damage, nerve damage, and even death.
6. Venereal disease may cause birth defects in the new baby.
7. Most venereal disease victims are under thirty.
8. It is possible to uncover many cases of venereal disease when the health department finds one.
9. The more sex contacts you have, the greater the chance of contracting the disease.
10. A symptom (sign) of syphilis is a burning pain and a pus discharge.
11. A symptom (sign) of gonorrhea is a "chancre" (shanker).
12. Signs and symptoms of venereal disease are easily detected, especially in a female.
13. Every person can help the fight against venereal disease.

II. MASTURBATION

14. Masturbation will often cause physical as well as mental damage.
15. Only males masturbate.
16. The only way to express your manhood (sexuality) is thru masturbation.

III. REPRODUCTION

17. Sperm cells are female sex cells.
18. Fertilization occurs when an egg cell unites with a sperm cell.
19. A female will menstruate (period) even after an egg cell becomes fertilized.
20. Egg cells mature in the ovary and are usually fertilized in the fallopian tubes.
21. Sperm and egg cells contain chromosomes that contain genes from which we get our inherited traits.
22. A baby will mature and grow in the uterine cavity for about 9 months.
23. The male sperm determines the sex of the baby at conception (fertilization).
24. Identical twins are born from two eggs and two sperms.
25. Fraternal twins are born from one egg and one sperm.
26. During intercourse, the male releases only one sperm cell.
27. Damage to the reproductive organ or the use of drugs, may result in birth defects of the new baby.

IV. CONTRACEPTIVES

28. The "Pill" may have some dangerous side effects.
29. The diaphragm can be shared between girls.
30. Spermicidal jelly, and creams always kills any sperm that may enter the vagina.
31. Douche is a poor method of a contraceptive device for protection.
32. The condom (rubber) is 100% effective. (Can never fail).
33. Withdrawal of the penis from the vagina just before ejaculation is a good method of contraception. ("Coitus Interruptus").

V. MARIJUANA

- 34. Recent research has shown that marijuana may cause possible brain damage.
- 35. Marijuana is physically addicting.
- 36. Marijuana has some medical value-therapeutic value.
- 37. Marijuana may cause emotional psychological dependence.

VI. LSD

- 38. LSD may cause suicidal tendencies.
- 39. LSD may cause birth defects in the new baby.
- 40. LSD is blue in color and tastes like a malted.
- 41. You can predict the results of an LSD trip beforehand.

VII. BARBITURATES

- 42. An important medical use of this drug is to bring about sleep.
- 43. Death may result from an overdose (O.D.).
- 44. There are no withdrawal symptoms from repeated use and misuse of barbiturates.

VIII. AMPHETAMINES

- 45. Amphetamines will improve test performance.
- 46. The normal medical use is for drowsiness and depression.
- 47. Death may result from an overdose (O.D.).
- 48. A need for larger doses may arise in some people who use the drug regularly.

IX. GLUE SNIFFING

- 49. Glue sniffing may result in brain, lung and liver damage.
- 50. Glue sniffing has therapeutic value-medical value (use).

X. COCAINE

- 51. Suicidal tendencies and possible death from overdose (O.D.).
- 52. Cocaine is a physically addicting drug.

XI. HEROIN

- 53. You can never kick the habit of this dangerous drug.
- 54. Heroin reduces the sex drive.
- 55. A dirty needle may cause hepatitis.
- 56. A drug substitute for heroin is Methadone.
- 57. Heroin is a physically addicting drug that may have severe withdrawal symptoms.

XII. GENERAL QUESTIONS

- 58. An addictive drug is one which causes an emotional and physical craving and a need to increase dosage.
- 59. A habit forming drug is one which causes emotional and physical craving but no need to increase dosage.
- 60. The best way to "kick" a habit is thru your SELF COURAGE.
- 61. Once an addict always an addict.
- 62. The effects of most drugs will depend on the following: Your mood, attitude, personality, quantity and quality of the drug involved.
- 63. A new and effective contraceptive method is sterilization for both the male and female.
- 64. The best way to learn about sex and drugs is thru experimentation.
- 65. Teachers, Doctors, Religious Leaders and your Family are the best sources to learn the facts of life.

END

APPENDIX C

Attitude Questionnaire

(Family Living)

PN 910639

BOARD OF EDUCATION OF THE CITY OF NEW YORK
BUREAU OF EDUCATIONAL RESEARCH

ATTITUDE QUESTIONNAIRE

"WHAT DO YOU THINK ABOUT FAMILY LIVING, INCLUDING SEX EDUCATION?"

We have come here today to ask you to help in a study we are doing by giving us your answers to the questions on the next few pages. All of these questions are about classwork that you are now taking in Family Living, Including Sex Education. The classwork is being taught in lessons called Family Living, Including Sex Education. Now that you are taking these lessons we would like to know how you feel about the classwork in Family Living, Including Sex Education.

Do not put your name on this paper. This is not a test. There is no right or wrong answers to these questions. It is most important, however, that you think each question over carefully. Each of your answers will be combined with those of pupils from other classes and schools. Please give your own answer to every question.

Now turn to page 1 for the directions.

- 1.. The prime requirement for personal readiness for marriage is the:
 1. ability to support a family.
 2. desire to be a parent.
 3. realistic understanding^{ex} one's strengths and weaknesses._A
 4. opportunity to better oneself socially and financially.
2. A family in which the mother provides the greatest influence is called:
 1. matriarchal
 2. patriarchal
 3. governess
 4. guardianship
3. Authorities agree that the paramount advantage to a couple for an adequate engagement is that it:
 1. eliminates all rivals for one's affection.
 2. allows for new experiences.
 3. allows time for arranging financial affairs.
 4. prepares couples for the married responsibilities of adults.
4. Which of the following is the MOST commonly stated belief of present day American family culture?
 1. belief in "equality of the sexes".
 2. belief that family values rather than individual values are to be sought in family living.
 3. belief in the male as the dominant partner.
 4. belief in exposing children to hardship in order to strengthen character.
5. In current American culture, the phrase the "Double Standard" in boy-girl relations usually means allowing:
 1. a boy to date two girls at the same time is proper conduct.
 2. a girl to date two boys at the same time is proper conduct.
 3. a boy and a girl to have different rules of proper conduct.
 4. double dating as a good means for maintaining proper conduct.

6. How do masculine and feminine roles of the modern urban American family compare with those of the old agrarian American family?
 1. There has been the greatest change particularly in the wife's role.
 2. There has been little change in the roles of the husband and wife.
 3. There has been the greatest change in the husband's role.
 4. There has been little change in the role of the grandparents, uncles and aunts.
7. People who are married are often asked what are the important things to look for in a marriage partner. Which of the following is LEAST often picked as an important consideration?
 1. The health background of the partner and the partner's parents.
 2. The ability of the partner to give and receive affection.
 3. The feeling, at first meeting, that "this is the one."
 4. Liking the same things and having similar temperaments.
8. According to recent studies the major reason for poor marital adjustment by eloped couples is generally because:
 1. they lacked the benefit of an engagement period.
 2. they often alienate their friends, relatives and parents.
 3. they sometimes are in poor financial condition.
 4. they usually are trying to hide something.
9. The organ that produces the male sex hormone is the:
 1. pituitary
 2. adrenal glands
 3. prostate
 4. testes
10. Authorities state that the MOST important quality for a girl to consider in the selection of a mate is that:
 1. he be physically attractive
 2. he has values that are similar to yours
 3. he be financially independent
 4. he be a few years older than you.

11. In general, of the following sources of marriage counseling the MOST reliable and competent is:
 1. a mutually respected friend.
 2. the parent of either spouse.
 3. a qualified newspaper counselor.
 4. a certified marriage counselor.
12. Which of the following statements MOST accurately differentiates the old agrarian American family from the modern urban American family?
 1. The nuclear family system was more prevalent in the old days.
 2. The family no longer functions as an independent economic unit.
 3. The kinship system is more prevalent today.
 4. The practice of polyandry and polygamy is on the increase.
13. Which of the following is the LEAST characteristic of present day American family culture?
 1. polygamy
 2. the nuclear family system
 3. kinship by bilateral descent
 4. high regard for children's welfare
14. Males and females can BEST obtain free medical help for venereal disease from:
 1. the Board of Health
 2. the Board of Education
 3. the Margaret Sanger Clinic
 4. a family counselor
15. The period in the family life cycle that is referred to as "EMPTY NEST" is the time during which:
 1. the newly married couple lives together without children.
 2. the children have left home to go to college.
 3. all the children have left home to establish their own households.
 4. the parents are busy raising pre-school children.

16. How does the divorce rate of couples who are both under 20 at the time of marriage compare with the divorce rate of couples who are older than 20 at the time of marriage?
 1. The divorce rate is slightly higher for couples who are older than 20 at the time of marriage.
 2. The divorce rate is about the same for both groups.
 3. The divorce rate is slightly higher for couples who are under 20 at the time of marriage.
 4. The divorce rate is much higher for couples who are under 20 at the time of marriage.
17. During the adolescent dating period, maintaining the limits of proper behavior between the boy and girl is usually determined MOST by the:
 1. behavior standards set by the boy
 2. behavior standards set by the girl
 3. behavior standards set by the parents
 4. behavior standards set by other boys and girls in the group
18. The terms "adolescent school years", "launching years", and the "empty nest" are used to describe:
 1. types of marriage patterns among people in general.
 2. types of marriage customs frequently found in most parts of the United States.
 3. certain stages of family life frequently found in the United States
 4. certain stages of dating customs frequently found outside the United States.

19. Jack has recently inherited \$30,000.00 from his wealthy grandmother. He has had several jobs during the last two years, but still can't find a job that suits him.

Bill has managed to save \$600.00 despite the fact that he has a modest income. After serving one year as an apprentice, he was promoted to regular status on his job.

In view of the above information about Jack and Bill which one of the following conclusions would be BEST?

1. Jack has the greater readiness for marriage because he has enough money in the bank to provide a good start for the marriage.
 2. Jack has the greater readiness for marriage because he obviously comes from a good family.
 3. Bill has the greater readiness for marriage because he likes to save his money.
 4. Bill has the greater readiness for marriage because of his proven ability to earn a living.
20. Which of the following is the LEAST characteristic of present day American family culture?
1. Belief that individual rather than family values are to be sought in family living.
 2. Belief in protecting children from hardship in order to develop character.
 3. Belief in exposing children to hardship in order to develop character.
 4. Belief that family values rather than individual values are to be sought in family living.
21. Surveys show the MOST frequent complaint reported by girls of the boys they date is that the boys in general are:
1. careless and thoughtless
 2. disrespectful and rude
 3. loud and boisterous
 4. overly critical and fault finding
22. In comparing the old agrarian American family with the modern urban American family which one of the following factors has basically changed the LEAST?
1. The influence of the extended family system
 2. The social importance related to faithfulness in marriage
 3. The percentage of marriages that end in divorce.
 4. The roles of the man and woman in the family setting.

23. In which one of the following areas does disagreement between husband and wife usually cause the MOST damage to the marriage relationship?
 1. Compatibility on questions relating to cooking and eating habits.
 2. Selecting social and recreational activities.
 3. City living as against suburban living.
 4. Having a small family as against a large family.
24. Syphilis is MOST likely to cause serious damage to the body of the infected person:
 1. three months after infection
 2. three to twelve months after infection
 3. one to two years after infection
 4. more than two years after infection
25. Of the following a disadvantage that is frequently stated to be characteristic of the nuclear family system is that the:
 1. "in-laws" have too much influence in family matters.
 2. "in-laws" are Not so available to help care for the children.
 3. grandparents have too much influence in family matters.
 4. grandparents are Not so available to help care for the children.
26. Family planning information and services can MOST readily be obtained from:
 1. the Board of Health
 2. the Board of Education
 3. a marriage counselor
 4. a family therapist
27. Historically, our social conventions relating to marriage are most closely related to the:
 1. protection of children primarily
 2. protection of women and children primarily
 3. maintenance of a patriarchal society
 4. maintenance of a matriarchal society

28. In general, it has been found that it is MOST characteristic for the man and woman during the engagement period:
 1. to argue most of the time.
 2. to have many mixed feelings about each other.
 3. to be happy together almost all the time
 4. to feel very sure of one another almost all the time.
29. From studies on the relationship between how long a man and woman knew each other before marriage and their claimed happiness as reported after marriage it has been found that generally:
 1. knowing each other less than six months before marriage is usually followed by happiness after marriage.
 2. how happy people are after marriage is usually not related to how long they knew each other before marriage.
 3. the longer a man and woman know each other before marriage, the more happy they usually consider their marriage.
 4. the longer a man and woman know each other before marriage, the less happy they usually consider their marriage.
30. According to recent studies which of the following factors do most people report to have the LEAST relation to happiness in marriage?
 1. the happiness of their parents marriage
 2. their ethnic and religious background
 3. their own happiness during childhood
 4. their own happiness during adolescence
31. Authorities in pre-marital counseling feel that a desirable engagement for most couples should last from:
 1. 2 to 6 months
 2. 6 to 12 months
 3. 12 to 24 months
 4. 24 to 48 months

32. The source of many dating problems in many modern cultures is historically related to the:
 1. increased independence of woman
 2. advent of birth control pills
 3. double standard of morality
 4. freedom of movement and travel
33. The minimum marriage age in New York State (with parental consent) is:
 1. 15 for boys and 14 for girls
 2. 16 for boys and 16 for girls
 3. 17 for boys and 17 for girls
 4. 18 for boys and 16 for girls
34. The greatest percentage of divorces and separations occur in marriages which took place in the:
 1. 15 - 19 year old age bracket
 2. 20 - 24 year old age bracket
 3. 25 - 29 year old age bracket
 4. 30 - 34 year old age bracket
35. The blood test which is required by law in order to get a marriage license is designed for which purpose?
 1. To see if a person has good blood
 2. To see if a person has or has ever had syphilis
 3. To see if a person has leukemia
 4. To determine if a person has the Rh factor
36. Which of the following is NOT necessary in order for reproduction to occur?
 1. The ovaries
 2. The hymen
 3. The uterus
 4. The fallopian tubes

37. Authorities agree that the reason why the testes are located outside the body is because:
1. this location provides protection against infection
 2. it is easier to give the area hygienic care
 3. a cooler than body temperature is needed to produce sperm
 4. there is not enough space inside the body
38. Studies show that problems concerning money arise during married life in:
1. practically all marriages
 2. approximately 75 per cent of marriages
 3. approximately 50 per cent of marriages
 4. less than 50 per cent of marriages
39. If scar tissue from an infection blocked the fallopian tubes in a woman so completely that the ovum could not pass, which of the following would be the result?
1. frigidity
 2. sterility
 3. impotence
 4. fertility
40. In order to obtain information related to infertility a married couple should contact the:
1. American Social Health Association
 2. National Association for Mental Health Inc.
 3. Planned Parenthood Federation of America Inc.
 4. American Institute of Family Relations

- APPENDIX D

What I Learned In Family Living

Suppose your answer to the Sample Question is "A" (Yes, all the time). Please darken the letter "A" on the Answer Sheet next to question number 41. If your answer to the Sample Question is not "A" but "B", "C", "D", or "E", darken the letter of your choice on the Answer Sheet next to question number 41.

We will now begin to answer questions 1 - 20. Darken the letter of your answer (A, B, C, D or E) on your Answer Sheet on the line next to the question number. We will start with question number 1 on the Answer Sheet and end with question number 20. Remember, you are to pick only one answer to each question.

NOW WE ARE READY TO BEGIN

1. How do you think most of your questions in class on Family Living, Including Sex Education were answered?
 - A. Very good
 - B. Good
 - C. Fair
 - D. Not good
 - E. Very poor

2. How many of your questions on Family Living, Including Sex Education were you able to talk about freely in class?
 - A. All
 - B. Most
 - C. Some yes, some no
 - D. Few
 - E. None

3. Has the classwork in Family Living, Including Sex Education helped you understand yourself better as a young person?
- A. Yes, very much
 - B. Yes, much
 - C. Sometimes yes, sometimes no
 - D. No, not much
 - E. No, not at all
4. How much more, if any, do you think you now understand your family?
- A. Very much
 - B. Much
 - C. Some
 - D. Not Much
 - E. Not at all
5. Has the classwork in Family Living, Including Sex Education helped to give you a good attitude toward health and sex?
- A. Yes, very much
 - B. Yes, much
 - C. Sometimes much, sometimes not so much
 - D. No, not much
 - E. No, not at all
6. Do you find it easier now to understand and use the correct words to talk about the different parts of the body?
- A. Yes, very much
 - B. Yes, much
 - C. Sometimes much, sometimes not so much
 - D. No, not much
 - E. No, not at all

11. How well do you understand the teacher's answers to your question in class on Family Living, Including Sex Education?
- A. Very well
 - B. Well
 - C. Sometimes well, sometimes not so well
 - D. Not so well
 - E. Not at all
12. How many of your questions on Family Living, Including Sex Education do you feel your teacher was able to talk about freely in class?
- A. All
 - B. Most
 - C. Some yes, some no
 - D. Few
 - E. None
13. Has the classwork in Family Living, Including Sex Education helped you to get along better with other boys and girls?
- A. Very much
 - B. Much
 - C. Some
 - D. Not much
 - E. Not at all
14. How much more willing are you now to talk with your parents about yourself?
- A. Very much
 - B. Much
 - C. Some
 - D. Not much
 - E. Not at all

15. How would you say your attitude toward yourself as a boy (or as a girl) has changed since taking classwork in Family Living, Including Sex Education?

- A. Very much improved
- B. Much improved
- C. Sometimes much, sometimes not so much
- D. Not so much improved
- E. Not at all improved

16. Do you feel the classwork in Family Living, Including Sex Education has helped you to use the correct words to talk about the different parts of the body?

- A. Very much
- B. Much
- C. Some
- D. Not much
- E. Not at all

17. Do you feel the classwork in Family Living, Including Sex Education has helped you to understand the physical changes that take place in your body as you grow older?

- A. Very much
- B. Much
- C. Some
- D. Not much
- E. Not at all

18. In what way, if any, would you say you now feel more responsible to make good decisions, which are based on sound values, since taking coursework in Family Living, Including Sex Education?
- A. Yes, I now feel much more responsible
 - B. Yes, I now feel a little more responsible
 - C. Sometimes I feel more responsible, sometimes I don't
 - D. No, I do not feel more responsible
 - E. No, I do not feel at all responsible
19. In what way, if any, would you say your attitude toward people and living things had changed since taking coursework in Family Living, Including Sex Education?
- A. Yes, I now feel much more respect
 - B. Yes, I now feel a little more respect
 - C. Sometimes I feel more respect, sometimes I don't
 - D. No, I do not feel more respect
 - E. No, I do not feel any respect
20. In what way, if any, would you say your attitude toward the family as an important part of society has changed since taking coursework in Family Living, Including Sex Education?
- A. Yes, I think the family is very important
 - B. Yes, I think the family is fairly important
 - C. Sometimes important, sometimes not so important
 - D. No, I do not think the family is very important
 - E. No, I do not think the family is at all important